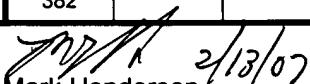


<b>Issue Classification</b> 	Application/Control No. 10/747,793	Applicant(s)/Patent under Reexamination TUOZZO, JAMES N.
	Examiner Mark T. Henderson	Art Unit 3722

ISSUE CLASSIFICATION				
ORIGINAL		INTERNATIONAL CLASSIFICATION		
CLASS	SUBCLASS	CLAIMED		NON-CLAIMED
402	19	B	42	/02
CROSS REFERENCES				
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)			
402	8	13	14	15
402	17			
281	21.1	28		
19	32	33	65	
8	382			
 Mark Henderson (Assistant Examiner) (Date)		<i>Monica S. Carter</i> Monica Carter (Primary Examiner) (Date)		Total Claims Allowed: 18  O.G. Print Claim(s) 1
(Legal Instruments Examiner) (Date)				O.G. Print Fig. 1

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1		31		61		91
	2		32		62		92
2	3		33		63		93
3	4		34		64		94
4	5		35		65		95
5	6		36		66		96
12	7		37		67		97
	8		38		68		98
13	9		39		69		99
14	10		40		70		100
15	11		41		71		101
	12		42		72		102
16	13		43		73		103
17	14		44		74		104
6	15		45		75		105
7	16		46		76		106
8	17		47		77		107
9	18		48		78		108
10	19		49		79		109
11	20		50		80		110
18	21		51		81		111
	22		52		82		112
23			53		83		113
24			54		84		114
25			55		85		115
26			56		86		116
27			57		87		117
28			58		88		118
29			59		89		119
30			60		90		120

<b>Issue Classification</b> 	Application/Control No. 10/747,793	Applicant(s)/Patent under Reexamination TUOZZO, JAMES N.
	Examiner Mark T. Henderson	Art Unit 3722

<b>ISSUE CLASSIFICATION</b>						
ORIGINAL		INTERNATIONAL CLASSIFICATION				
CLASS	SUBCLASS	CLAIMED		NON-CLAIMED		
			/	/		
<b>CROSS REFERENCES</b>						
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
294	6					
24	67R	67.5	67.9	67.11		
24	901					
(Assistant Examiner) (Date)		(Primary Examiner) (Date)			Total Claims Allowed:	
(Legal Instruments Examiner) (Date)					O.G. Print Claim(s)	O.G. Print Fig.

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
211		241		271		301	
212		242		272		302	
213		243		273		303	
214		244		274		304	
215		245		275		305	
216		246		276		306	
217		247		277		307	
218		248		278		308	
219		249		279		309	
220		250		280		310	
221		251		281		311	
222		252		282		312	
223		253		283		313	
224		254		284		314	
225		255		285		315	
226		256		286		316	
227		257		287		317	
228		258		288		318	
229		259		289		319	
230		260		290		320	
231		261		291		321	
232		262		292		322	
233		263		293		323	
234		264		294		324	
235		265		295		325	
236		266		296		326	
237		267		297		327	
238		268		298		328	
239		269		299		329	
240		270		300		330	
						360	